

PART B - FEE(S) TRANSMITTAL

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00140 7590 10/13/2004

LADAS & PARRY
26 WEST 61ST STREET
NEW YORK, NY 10023



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

WILLIAM R. EVANS	(Depositor's name)
<i>WILLIAM R. EVANS</i>	
(Signature)	
DECEMBER 27, 2004	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/649,291	08/27/2003	Rafail Bronstein	U014768-2	5473

TITLE OF INVENTION: DATABASE FUNCTIONS IN A CLOSED LOOP CEPS-PRESS SYSTEMS

10/04/2005 BABRAHA2 00000108 10649291

01 FC:1501
02 FC:1504

1400.00 OP
300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$150 / 400	\$300	\$1670	01/13/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
EVANS, ARTHUR G	2622	358-001150

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

LADAS & PARRY LLP
26 WEST 61st STREET
3 NEW YORK, NEW YORK
10023

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CREO IL LTD

HERZLIA, ISRAEL

Recorded 6/11/01

Reel 012944

Frame 0274

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

4b. Payment of Fee(s): \$1,400.00 (check enc.)

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature _____

Date DECEMBER 27, 2004

Typed or printed name JULIAN H. COHEN

W. Evans

Registration No. 20,302

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

2. Applicant

A. Asserted small entity status in this application by

- payment of the basic filing or national fee as a small entity (37 C.F.R. § 1.27(c)(3)) or
- submission of a Written Assertion or Statement of Small Entity Status (37 C.F.R. § 1.27(c)(1))

It is confirmed that small entity status for this application has been checked, is still in effect and is being asserted.

- A WRITTEN ASSERTION OR STATEMENT OF SMALL ENTITY STATUS signed by an appropriate party as required by 37 C.F.R. § 1.27 is attached.

WARNING: "Payment of a fee in other than the small entity amount is not sufficient notification that small entity status is no longer appropriate." 37 C.F.R. § 1.27(g)(2).

(complete the following, as applicable)

B. Applicant hereby notifies the Office, in accordance with the requirements of 37 C.F.R. § 1.27(g)(2), that it no longer has status as a small entity.

A "NOTIFICATION OF LOSS OF STATUS AS SMALL ENTITY" signed by an appropriate party is attached.

Applicant has not asserted small entity status.

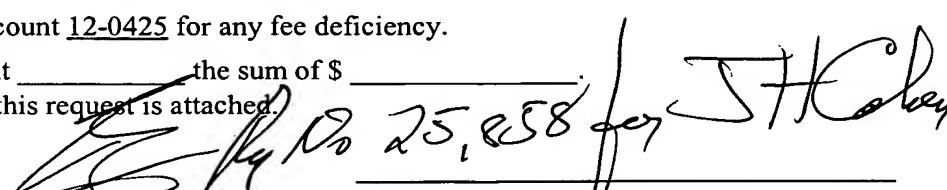
3. Fee (37 C.F.R. 1.18(a) and (b)):

Application status is:

	<u>Regular</u>	<u>Design</u>
small business entity—fee	<input type="checkbox"/> \$ 700.00	<input type="checkbox"/> \$400.00
other than a small entity—fee	<input checked="" type="checkbox"/> \$1,400.00	<input type="checkbox"/> \$800.00
Publication Fee	<input checked="" type="checkbox"/> \$ 300.00	

4. Payment of fee:

- Enclosed please find check for \$ 1,700.00.
- Charge Account 12-0425 for any fee deficiency.
- Charge Account _____ the sum of \$ _____.
A duplicate of this request is attached.



SIGNATURE OF PRACTITIONER

JULIAN H. COHEN

(type or print name of practitioner)

Reg. No. 20302

Tel. No.: (212) 708-1887

P.O. Address

Customer No.: 00140

c/o Ladas & Parry LLP
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